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**\*BIBDATASHEET\***

CONFIRMATION NO. 2742

Bib Data Sheet

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/695,715	10/23/2000	455	2618	40593/CAG/B600
RULE				

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 09/634,552 08/08/2000  
 which claims benefit of 60/160,806 10/21/1999  
 and claims benefit of 60/163,487 11/04/1999  
 and claims benefit of 60/163,398 11/04/1999  
 and claims benefit of 60/164,442 11/09/1999  
 and claims benefit of 60/164,194 11/09/1999  
 and claims benefit of 60/164,314 11/09/1999  
 and claims benefit of 60/165,234 11/11/1999  
 and claims benefit of 60/165,239 11/11/1999  
 and claims benefit of 60/165,356 11/12/1999  
 and claims benefit of 60/165,355 11/12/1999  
 and claims benefit of 60/172,348 12/16/1999  
 and claims benefit of 60/201,335 05/02/2000  
 and claims benefit of 60/201,157 05/02/2000  
 and claims benefit of 60/201,179 05/02/2000  
 and claims benefit of 60/202,997 05/10/2000  
 This application 09/695,715  
 claims benefit of 60/160,839 10/21/1999  
 and claims benefit of 60/163,488 11/04/1999  
 and claims benefit of 60/163,780 11/05/1999  
 and claims benefit of 60/164,446 11/09/1999  
 and claims benefit of 60/164,987 11/11/1999

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 12/15/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

Verified and Acknowledged	Examiner's Signature	Initials	CA	69	163	5
<b>ADDRESS</b> 23446						
<b>TITLE</b> ADAPTIVE RADIO TRANSCEIVER						
<b>FILING FEE RECEIVED</b> 3774	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees			
			<input type="checkbox"/> 1.16 Fees ( Filing )			
			<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )			
			<input type="checkbox"/> 1.18 Fees ( Issue )			
			<input type="checkbox"/> Other _____			
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